

OFFICIAL ORDER

Concerning the Vaccination of School-Children.

Revised and in force January 25, 1881.

OFFICE OF THE SECRETARY.

SPRINGFIELD, DECEMBER 1, 1881.

At a special meeting of the State Board of Health, held in the City of Chicago, on Tuesday, November 22, 1881, the following resolution was unanimously adopted:

RESOLVED, That by the authority vested in this Board, it is hereby Ordered, that on and after January 1, 1882, no pupil shall be admitted to any public school in this State without presenting satisfactory evidence of proper and successful vaccination.

OFFICIAL:

JOHN H. RAUCH, M. D., *Secretary.*

THE STATE BOARD OF HEALTH is charged with "the general supervision of the interests of the health and lives of the citizens of the State," and has "authority to make such rules and regulations

* * * as it may deem necessary for the preservation or improvement of the public health; and it shall be the duty of all police officers, sheriffs, constables, and all other officers and employees of the State to enforce such rules and regulations" * * * [Session Laws, 1877. Act approved May 25, 1877.]

In the discharge of this duty and in the exercise of this authority the above ORDER is issued, in the belief that it is entirely feasible to make small-pox of "as little effect as any extinct epidemic of the Middle Ages;" and that the first, and absolutely necessary, step to this end is to secure the general vaccination of children, so as to prevent the accumulation of unprotected people as these grow up.

During the past fifteen years, 1867 to 1881, both inclusive, out of an aggregate of **227,113** individual scholars attending the public schools of Chicago, there have occurred only **17** cases of small-pox and varioloid.* This immunity is the direct result of a requirement of the Health Department of that city, the enforcement of which was begun in 1867, and by which, evidence of successful vaccination is made a condition precedent to admission to any Chicago public school.

It is, probably, unnecessary to add anything to the testimony of these figures. They are in themselves an unanswerable argument for the value of vaccination. What has been done in Chicago may be done the more readily in smaller towns and villages, in proportion as these latter are less exposed to frequent importation of the disease or to large accessions of unprotected immigrants.

Small-pox is now wide-spread through all the Northern States from the Atlantic to the Pacific, and is daily making its appearance at many

*For the facts which have caused this number to be increased from 15 to 17 since the previous edition, see caption "To Physicians," sec. iii, par. 5.

new points in our own State. To some extent this is due to the recent enormous immigration; but it is undoubtedly true that the neglect of vaccination among our own people has also much to do with the present alarming disposition to a spread of the disease. This emergency, therefore, seems to offer a favorable opportunity for inaugurating in the State at large a measure which has proved so signally successful in its chief city.

In making vaccination to this extent obligatory, however, the BOARD has duly considered not only the rights but the prejudices of the public on the subject, and the following suggestions and instructions are intended to secure its just rights and to remove existing grounds for honestly-entertained prejudices.

To Physicians.

I.—It is taken for granted that all vaccinations should be performed by competent medical men, or, if by a non-professional person of sufficient skill and experience, that the result shall be examined and certified by a legally-qualified physician. A valid opposition to vaccination—a so-called "prejudice"—undoubtedly has its source in the failures and untoward results following the unskillful, careless manipulations of amateurs inexperienced in qualities of virus, in traumatic complications, in conditions of the system forbidding the operation, and in the danger of transmitting or causing other diseases by unclean instruments, incautious scarification, etc., etc. The operation is apparently so simple in itself that almost every one feels qualified to perform it; and although there can be little or no objection, for example, to the mother vaccinating her child, under the supervision of the family physician, and with virus furnished or approved by him, yet when we find one medical man succeeding in 95 per cent. of his vaccinations, and, *ceteris paribus*, another in only 70 per cent., it must be admitted that there is an art even in what is popularly supposed to be so simple a matter as scratching the skin.

II.—An equally well-founded "prejudice" in the public mind has been caused by the use of long-humanized virus. Such virus is open to two objections: First, and most important, the deterioration in vigor caused by the transmission of virus through numerous human beings—hence, imperfect protection and relatively frequent cases of varioloid among those so vaccinated; and, second, the danger (real or supposed) of conveying other disease by such virus. Both these objections are fully met by the use of bovine virus from approved propagators.

III.—With the view of ultimately tabulating the results obtained, the *Scholar's Certificate of Vaccination* (Form 51, S. B. H.) has been so arranged as to secure certain data with little labor to the certifying physician. The following explanations will facilitate the making out of the *Certificate*, and, it is hoped, secure uniformity in the returns:

1. In all cases the blanks in entries 1, 2 and 3 are to be filled up. Where the

Christian name is not distinctively masculine or feminine, indicate the sex by the small letter *m.* or *f.**

2. In cases of *primary vaccinations* fill up, also, entries 4, 6 and 7, and complete No. 5 by drawing the pen through the unnecessary word "bovine" or "humanized," as the case may be. In No. 7 ("Result") enter the word *Typical*, if the resulting scar is well-marked, characteristic, of normal size, and perfect in outline, depression and pitting; or *Modified*, if, while well-marked and characteristic, the scar is less than normal size and of irregular contour; or *Bad*, if the scar be less than one-fourth of an inch in diameter, or simply a smooth, flat, shiny mark.

3. In cases of *previous vaccination*: If a girl under twelve or a boy under fourteen years of age, revaccination is not indispensable—*provided*, the scar be a "typical" one. Should there be any doubt on this point, it must be decided in favor of revaccination, in which case all the entries require to be filled up. If the evidence of successful vaccination within the years mentioned be satisfactory beyond a peradventure, then the entries, 4 5 and 7, will be omitted; but entries 6, 8 and 9 should be filled up. Girls over twelve, and boys over fourteen, must in every case be revaccinated, no matter how satis-

* It is not expected that a physician shall know, of his "own knowledge," the name of each child he vaccinates, nor the age, nor the exact date of "previous vaccination." These are all matters of minor importance which he may qualify in the *Certificate* by the phrase *so stated*, or any equivalent. He can, however, always know, of his "own knowledge," when he vaccinated a given child; with what kind of virus; when he made the necessary examination; and what result he finds. So, too, in a case of "previous vaccination," it will rarely happen that the certifying physician will be the one who performed the original vaccination, or, if so, that he knows, of his "own knowledge," the exact date of the operation. For such information he must, as a rule, rely upon the statement of the parent, guardian or child; and, as suggested, may qualify his entry with the words *so stated*. What he can know in every instance, of his "own knowledge"—and this is the vital point of the whole matter—is what evidence the child presents on its *own person* of being properly and securely protected against small-pox. To this he can always certify, of his "own knowledge," and without any qualification.

factory the scar may be, unless the evidence is conclusive that a successful primary vaccination has been effected subsequent to those ages and within the past five years.

4. If the vaccination be a failure, the child will be furnished a *Certificate* duly filled out as to entries 1, 2, 3, 4, 5 and 6, and the word *Failure* written in No. 7. In such a case, the operation must be repeated at intervals of a fortnight, until successful, or until at least five essays have been made—except in instances where the physician has good reason for believing that the failure is due to such insusceptibility as, in itself, amounts to protection. A “Failure” *Certificate* must be given for each unsuccessful attempt.

5. If more than one in five primary vaccinations are failures, the physician should suspect the quality of his virus, and obtain a supply from a new source. It should be, and with most physicians it undoubtedly is, unnecessary to urge the importance of examination at a proper interval after the operation. Such examinations should be always made, because, among other reasons, without it the vaccinator deprives himself of the only proof of the value of the virus employed, and his vaccinees may thence be reposing in a false—possibly a fatally

false—security. Unfortunately, all members of the profession are not so careful as they should be on this point. Since this ORDER was first issued, two children of a prominent citizen of Chicago have died of small-pox as a direct result of neglecting such an obvious precaution. These were school-children, and, in obedience to the usual requirements, had been vaccinated. *Certificates were furnished at the time of the operation.* After they were attacked it was ascertained that the operation had not been successful—no trace but the so-called “certificate” remaining to show that it had ever been performed; and inquiry elicited the fact that the physician had never seen the children after the vaccination until called upon to attend them in their fatal attacks of small-pox.*

IV.—Legally-qualified physicians may obtain the *Scholar's Certificate* blanks from teachers, school directors or other officers of public instruction; from county clerks; or, by mail, direct from the Secretary's office, at Springfield.

* These cases have led Health Commissioner DEWOLF, of that city, to order a thorough re-inspection of all school children in Chicago, and the adoption of the *Certificate* prepared by this BOARD, the proper use of which would make such an occurrence impossible.

To School Authorities.

I.—The execution of this order is necessarily devolved upon the various officers of public instruction—county superintendents, school directors, trustees and teachers—each and all of whom are hereby authorized and directed to aid in its enforcement in their respective capacities. In all cases, however, the assistance and co-operation of the local health authorities should be invited.

Much of the success of this effort to protect the children from a loathsome pestilence, will depend upon the wisdom, firmness and intelligent action of the school authorities. Timely notification and instruction will save much unnecessary friction; and exact information will soon dispel ignorant opposition. It only needs that the public be rightly informed to secure ready co-operation. All inquiries will be promptly answered from this Office, and every available facility afforded for meeting emergencies. It is not desired, except as a last resort to arbitrarily enforce this measure; at the same time it should be clearly understood that it will be enforced.

II.—County superintendents are respectfully referred to the accompanying circular of the State Superintendent of Public Instruction, issued in his official capacity as adviser; and whose advice and instruction it is made, by law, the duty of county superintendents to “faithfully carry out.”—(See *Illinois School Law*, sec. 20—in force July 1, 1879.) It is suggested that the county superintendent, as the “official adviser of the school

officers and teachers of his county,” explain to the directors and teachers the scope of the Order, and advise as to the methods of its enforcement.

III.—Teachers—who ought, in all cases, to be vaccinated or revaccinated at the present time—should familiarize themselves with the form of the *Scholar's Certificate*; see that it is properly filled out when presented; make a record of its data on the blank return (Form 52, S. B. H.,) and forward said return, in its accompanying envelope, to the Secretary's office, in Springfield, as herein directed.

In the examination of the *Certificate*—

1.—Special attention must be paid to the entries in “4. Date of Vaccination”; “6. Date of Examination”; and “8. Previously Vaccinated.”

Any *certificate* relating to a recent vaccination—that is, one performed within the past twelve months—must show the date of such vaccination and the date of examination; and an interval of not less than ten days must be shown between the two dates.

Any *certificate* relating to a previous vaccination only—that is, one performed prior to January 1, 1881—must state the year of such vaccination, and the date of examination; which examination must have been made since December 1, 1881.

Any *certificate* not conforming to one or the other of these requirements is imperfect, and must be returned to the certifying physician for completion. This is essential in order to be assured that the child has been recently examined, and that

the record concerning its vaccination is matter of knowledge and not of presumption or opinion. In this connection see what is said above "To Physicians," sec. iii, par. 5.

2.—A *certificate* of recent vaccination issued by a legally-qualified physician, and in which the result has been a failure (see explanation numbered 4, "To Physicians," *supra*,) shall be received as a substantial compliance with the ORDER, *entitling the child to admission pending the result of the repeated operation*. Watchfulness on the part of the teacher will often be necessary to secure the required repetition, and authority is hereby given to exclude the child, if satisfactory evidence be not adduced within a reasonable time (say two weeks) that the operation has been repeated.

3.—*Certificates* of successful vaccination, after the data have been entered on Form 52, will be returned to the children, and shall be valid, as entitling to admission, until otherwise ordered.

4.—"Failure" *Certificates* will be taken up on presentation, and forwarded with the returns.

IV.—Returns for the current school-year (ending June 30, 1882,) will be made on the first day of February, prox., for the month of January, and must account for every child whose name appears on the School Schedule for the latter month. A supplemental return will be made at the close of the last term of the school year, to include all scholars admitted on and after February 1, 1882. Thereafter, returns will be made at the end of the first month of the first term of each school

year, and supplemental returns at the close of each term. All returns should be made through the County Superintendent, unless that officer directs to the contrary.

V.—Another edition of 500,000 *Certificates*, making 800,000 in all, has been printed; and these are furnished as before to the County Superintendents, for distribution on the basis of the total number of school-children enrolled in each county. Supplies in excess of this apportionment will be furnished on application.

VI.—Unavoidable delays having occurred in the promulgation of this ORDER a reasonable extension of the period first fixed will be allowed,—not, however, to exceed the 25th inst., by which date every scholar must have presented "satisfactory evidence of proper and successful vaccination."

VII.—It is not intended, nor is it necessary, in the enforcement of this measure, that a single child should be debarred from regular school attendance; but it is earnestly hoped to thus secure, to the rising generation at least, the benefits of an agency against small-pox, concerning which "it has been shown to diminish the epidemic influence; it has been shown to preserve the good looks of the people; it has been shown that it tends to make small-pox a mild disease, compared with the same disease in the unprotected; it confers an almost absolute security against death from small-pox; and, lastly, it has been shown to exercise a protective influence over the health of the community generally."—*Aitken*.

JANUARY 2, 1882.

OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION,

SPRINGFIELD, ILL., DECEMBER 1, 1881.

To County Superintendents of Schools, School Boards and Teachers:

The State Board of Health, for the purpose of restricting the spread of the small-pox and of depriving the disease of its most serious effects, has, in the exercise of authority given by the act creating the Board, passed the Order recited above, relative to the vaccination of the pupils of the public schools; and county superintendents are asked by the Board to assist in distributing to the districts the circulars and blanks sent them; school boards are instructed to enforce the order in the schools in their charge, and teachers to inspect certificates of vaccination presented by their pupils, to make a record of them for their own use, and a return of the same to the Secretary of the Board in this city, in the way and at the times indicated.

I need not say that the Board has in view, in making this Order, an end, whose accomplishment is of great concern to the whole community. Neither need I say to you, who have so often known of schools discontinued for several weeks, or broken up for a term by the presence of small-pox in the vicinity, that the purpose of the Board has an intimate connection with the welfare of our schools.

I bespeak, therefore, for the Board your cordial and faithful co-operation in carrying out its plans according to the instructions given.

JAMES P. SLADE,

State Superintendent of Public Instruction.

SCHOLAR'S CERTIFICATE OF VACCINATION.

ILLINOIS STATE BOARD OF HEALTH.-No. 51.

1. Scholar's { Name: } 2. Age: { Yrs. | Mo's. }
3. Residence: 4. Date of Vaccination: { } 188..
5. Virus: { Bovine. | Humanized. } 6. Date of Examination: { } 188.. 7. Result:
8. Previously Vaccinated: { In the year 18..... } 9. Result:

I Hereby Certify that the foregoing statements are true, of my own knowledge, and that the child named has been vaccinated, with the result above set forth.

The certifying Physician should read Circular No. 50, S. B. H., {
for full information concerning this Certificate.

..... M. D.